PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents F.O. Box 14-50

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRICTIONS: This form should be used for transmitting the ISSUE IEE and PUBLICATION IEE (if required, blacks 1 through 5 should be completed where appropriate All Interfer correspondence including the Patent, advance order and auditionation of maintenance fee will be mailed to the current correspondence address is indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notificatio	ns.	awase in Brock 1, by (a) specifying a new corre	pondence address, a	mater (b) matering a sep	unite The The Prince	
CURRENT CORRESPONDEN	CE ADDRESS (Note: Use Blo	ck 1 for any change of address)	Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fe(s) Transmittal. This certificate cannot be used for any other accompanying pagers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailine or transmission.			
466 7.	590 01/19/3	2010					
YOUNG & THO 209 Madison Stree Suite 500	et		I he Stat add tran	Certificate of Mailing or Transmission I hereby certify that this Pecel's Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE Fiel address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Alexandria, VA 22	2314					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/518,084	08/24/2005		Hakan Enggyist		1510-1097	2895	
TITLE OF INVENTION: S LIQUID, IMPLANT MATE				ERIAL, AND POWI	DERED MATERIAL, HYI	DRATION	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(8) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/19/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
KOSLOW, CAROL M		1793	106-035000				
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.63). Change of correspondence address (or Change of Correspondence Address for PIO/SB/12) alternative for Change of Correspondence Address Ten			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed.				
ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth i (A) NAME OF ASSIGN	s an assignee is identif n 37 CFR 3.II. Compl			atent. If an assignee assignment.		document has been filed for	
Doxa AB			Uppsala,	Sweden			
Please check the appropriat	e assignee category or o	categories (will not be p	rinted on the patent):	Individual 🖾 Corp	poration or other private gr	oup entity Government	
4a. The following fee(s) are submitted: ☑ Issue Fee ☑ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			ib. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☑ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 2 50 112 0. (enclose an extra copy of this form).				
5. Change in Entity Status			(if necessary) ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
a. Applicant claims S							
NOTE: The Issue Fee and I interest as shown by the rec	Publication Fee (if requeords of the United State	ired) will not be accepte es Patent and Trademark	d from anyone other than t Office.	he applicant; a regist	ered attorney or agent; or t	he assignee or other party in	
Authorized Signature	/Benoit Ca	stel/		Date Marc	h 5, 2010		
Typed or printed name Benoit Castel		Registration No. 35,041					
This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	ion is required by 37 CI lity is governed by 35 I application form to the is for reducing this burg jinia 22313-1450. DO 1-1450.	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	on is required to obtain or a 1.14. This collection is est depending upon the indivi- e Chief Information Office COMPLETED FORMS TO	retain a benefit by the timated to take 12 mi ridual case. Any com er, U.S. Patent and To D THIS ADDRESS.	e public which is to file (an inutes to complete, includi aments on the amount of ti rademark Office, U.S. Dep SEND TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.